SFSP Application Guide

Please use the screen shots below as aguide to fill out the SY 21 Summer Application

Does Sponsor claim Non-Profit status?	Yes ○ No
Did Sponsor participate last year?	Yes ○ No
Does the Sponsor provide an ongoing, year-round service to the cor	mmunity? Yes No If no, contact DOE
Does Sponsor receive funding from other federal programs?	● Yes ○ No
Child and Adult Care Food Program:	○ Yes ○ No Select the USDA programs you
USDA Food Distribution Program :	O Yes O No
School Meals :	○ Yes ○ No operate.
Special Milk Program(SMP):	○ Yes ○ No
Date of your SFSP Staff Training / First Date of Training :	(MM/DD/YYYY)
Enter date staff will be trained on Civil F applicable SFSP program duties in 2021 needed).	
Are your requesting an Advance?	○ Vas ♠ Na
Are you requesting an Advance? Will Sponsor be contracting with a Food Service Management Com	O Yes ● No npany (FSMC)? O Yes ● No
Will Sponsor be contracting with a School (including Universities) for	
	an Services(DHS) been notified of your intention to operate? • Yes O No If no, contact DHS
Did any of the personnel work for another SFSP or FSMC?	Yes No
If yes, give name of person, address of sponsor or FSMC	
), 8	
f you have staff that are working for another Summer S or FSM company enter names here.	Sponsor
	Sponsor First Name Last Name
r FSM company enter names here.	
Name of person Authorized To :	First Name Last Name
Name of person Authorized To : Approve purchases or rentals :	First Name Last Name
Name of person Authorized To : Approve purchases or rentals : Approve the number of work hours for employee's	First Name Last Name

If yes, please provide source and amo	ount:			
	Source Amount		If you have received funding from	
	Ļ	\$		outside the nutrition program (such a
	_	\$		grant funding) for SY 21 enter here.
noor limit or dony admission because	of race, color, age, ec.	\$ disability or nation	al origin?	○ Yes ○ No
nsor limit or deny admission because on the how and when the Public Release States.			ai origin?	○ Yes ○ No
. now and when the rubble release ou	atement will be almout	iccu.		
			/	<u> </u>
	_			
		nter how many		
unaianta d'Omanatianal (ositions with ea		Add the total hours per-day
rojected Operational S	Salaries		u	ınder each title.
itle	Person	s # Hours Per	Day Projected	Salary
oodDirector/Manager	0	0	\$ 0	The projected salary is the
Cook	0	0	\$ 0	amount paid to each "title"
Cook Assistant(s)	0	0	\$ 0	during the summer program.
tite Supervisor(s)	0	0	\$ 0	For 2021 this will be the
tite Assistant(s)	0	0	\$ 0	remainder of the school year
Other	0	0	\$ 0	school year and summer
		TOTAL	\$ 0	months together.
Example: 2 cook positions	at 6 hrs. and 8 h	ırs. a		months together.
day = 14hrs per day. Salar	y of \$20,000 and	l I		
\$25,000 9 months for = 4	5,000 projected s	salary		
for the 2 cook positions.				
Projected Administrativ	/e Salaries _			
Title	Persons	# Hours Per Da	ay Projected Sala	Calculate the same as above
		\neg		only enter the director/food
Director	0	0	\$ 0	only effect the uncetofficou
Director Coordinator	0	0	\$ 0 \$ 0	service manager's hours and
Coordinator	0	0	\$ 0	service manager's hours and
Coordinator Financial manager /Account	0	0	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0	service manager's hours and salary under Operational
Coordinator Financial manager /Account Monitor	0 0	0 0	\$ 0 \$ 0 \$ 0	service manager's hours and salary under Operational salaries or Administrative bu

Will you receive income from funding sources other than the USDA to help finance the Summer Meals?

○ Yes ○ No